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SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/067,599	04/28/98	395	2784	RA998-007

SAMUEL STEVENS ALLISON, FUQUAY-VARINA, NC; KENNETH JAMES BARKER, CARY, NC.

APPENDIX

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED

*Line 1/62*

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED

\_\_\_\_\_

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

*Line 1/62*

FOREIGN FILING LICENSE GRANTED 05/18/98

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged <i>v/j</i>	Examiner's Initials _____ <i>Initials</i>	NC	13	14	3

ADDRESS

JOSCELYN G COCKBURN  
IBM CORPORATION 972/B656  
P O BOX 12195  
RESEARCH TRIANGLE PARK NC 27709

*Cust. No. 25299*

TITLE

~~NETWORK WAKE-UP PATTERN MATCHING IN COMMUNICATIONS NETWORK~~

FILING FEE RECEIVED  \$1,060	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bib Data Sheet

CONFIRMATION NO. 1371

SERIAL NUMBER 09/067,599	FILING DATE 04/28/1998 RULE	CLASS XXX	GROUP ART UNIT 2177	ATTORNEY DOCKET NO. RA998-007
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**APPLICANTS**

SAMUEL STEVEN ALLISON, FUQUAY-VARINA, NC;

KENNETH JAMES BARKER, CARY, NC;

\*\* CONTINUING DATA *None*\*\* FOREIGN APPLICATIONS *None***IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 05/18/1998

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	NC	DRAWING 13	14	3
Verified and Acknowledged	<i>SM</i> / <i>SA</i> Examiner's Signature Initials				

**ADDRESS**

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 27709

**TITLE**

PATTERN MATCHING IN COMMUNICATIONS NETWORK

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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